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ABSTRACT

An overview of the current status of child care information and referral (CCIR) services in the United States is provided in this report, based on the first phase of a 3-year study funded jointly by the Day Care Division of the Administration for Children, Youth, and Families and the Ford Foundation. Chapter One defines the project's goals and objectives and discusses the policy context of the study. Chapter Two describes the methods of data collection; the present scope, variety, and distribution of CCIR organizations; the organizational characteristics of CCIR; and the information and referral function and process. The final chapter notes the types of organizations providing CCIR and identifies areas in need of further research. (Author/JA)

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Prepared for the Day Care Division • Administration for Children, Youth and Families
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Project Connections

A Study of Child Care Information and Referral Services

Phase I Results: A National Profile of Child Care Information and Referral Services

PS012223

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FOREWORD

One of the primary goals of the Administration for Children, Youth and Families (ACYF) is the development of systems which will ensure the most effective and efficient use of existing service programs. By developing such systems, it will be possible to increase the amount of services utilized and, at the same time, to hold the costs associated with these services to a reasonable level.

The expansion of child care information and referral (CCIR) services throughout the country appears to be an excellent mechanism for increasing the utilization of both existing child care services and other social services as well. To date, however, relatively little information has been gathered with respect to the operation of CCIR services.

Project Connections represents the first major national effort to develop a systematic body of information regarding the functions and effects of different types of CCIR services and to relate those findings directly to current and potential public policies and programs. Moreover, because of its joint sponsorship by ACYF and The Ford Foundation, this study also represents a unique opportunity for bringing together different and sometimes divergent perspectives and priorities from both the private and the public sectors.

The following report provides an excellent overview of the current status of CCIR services in the United States. It is an important first step in the development of appropriate public policies regarding such services and it is indicative of the importance and timeliness of *Project Connections.*

Herschel Saucier

Herschel Saucier
Acting Commissioner
Administration for Children, Youth and Families

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Background and Policy Framework

A. INTRODUCTION

Project Connections is a three-year (1978-1980) study jointly funded by the Day Care Division of the Administration for Children, Youth and Families (Office of Human Development Services, Department of Health, Education and Welfare) and the Ford Foundation. The principal goal of this project is to examine the benefits and costs of child care information and referral (CCIR)[1] services in general and those of specific CCIR models. The impact of CCIR on parents, child care providers, and the broader community will all be considered in this effort. The study will culminate in a series of policy-oriented recommendations regarding the role of the federal government with respect to the provision of technical and/or financial assistance to CCIR services.

Project Connections represents the first major national effort to develop a systematic body of information regarding the functions and effects of different types of child care information and referral services and to relate those findings directly to current and potential public policies and programs. No major systematic study of these issues has previously been conducted, and virtually no base of information regarding the supply, distribution, effects, and needs of child care information and referral services has been developed.

This project will be carried out in four phases. The major objectives of Phase I, which was completed in early 1979, were to develop a national profile of the extent and characteristics of CCIR services; to explore the relationship between population characteristics and the distribution of CCIR organizations; to identify the major policy issues and dimensions of the study; and to design an overall research plan for the remainder of the project. Further phases of the study will be devoted to evaluating the effectiveness and efficiency of CCIR services, developing policy recommendations, and preparing technical assistance materials for organizations providing child care information and referral.

This report consists of three major chapters. The first describes the goals and objectives of *Project Connections* and discusses the policy context of the study. The second chapter briefly describes the design of Phase I and provides a profile of CCIR services currently operating within the United States. The final chapter discusses the Phase I findings and examines their policy implications.

B. POLICY CONTEXT OF THE STUDY

1. Overview

Child care arrangements outside the immediate family are common in the United States, where 90 percent of all parents use some form of supplementary care in the rearing of their children. Approximately 16 million families — 62 percent of all those with children — use such arrangements on a regular basis. Given the steady increase in the number of families with working parents and young children, it is likely that the use of extra-familial child care arrangements will substantially increase in the years ahead.

Recently, a number of policy analysts have called for the development of child care information and referral services as one mechanism for assisting families in locating child care arrangements. According to Dr. Edward Zigler, former director of the Office of Child Development,"a major problem with day care is the lack of centralized information to help parents locate existing day care services." He recommends the establishment of "community referral agencies...separate from welfare and other social services, that could help refer families to reliable day care providers of various types" (Zigler, 1977).

Similar recommendations have been made by the National Academy of Sciences report, *Toward a National Policy for Children and Families* (1976); by the Carnegie Council on Children in its book, *All Our Children: The American Family Under Pressure* (Keniston, 1977); and by the Stanford Research Institute's report, *Federal Policy for Pre-School Services: Assumptions and Evidence* (Larson, 1975), which states that "the most pressing problem for individual families may be the lack of thorough and realistic information at the local level about both formal and informal facilities." More recently, the Congressional Budget Office, outlining five alternatives to current policy in its 1978 report, *Child Care and Pre-School: Options for Federal Support,* has included CCIR as a necessary adjunct to any type of child care voucher program.

It is not only experts and social policy analysts who perceive the need for CCIR. When a national survey (Rhodes and Moore, 1975) asked parents to rank-order those program support options for which they would most like to see government funds allocated, they chose, above all others, "A referral system where parents could get information about screened and qualified people and agencies to provide child care."

Even those who oppose any federal involvement in the expansion of

day care on the grounds that there is no evidence of unmet need (Larson, 1975; Woolsey, 1977) or that it is prohibitively expensive (Bruce-Briggs, 1977), are sympathetic to the development of CCIR as a way to help redress local imbalances of supply and demand and make the existing system work better.

At the present time, there is no specific or explicit federal policy regarding CCIR. Although Title XX of the 1967 Social Security Amendments encourages the provision of information and referral (I&R) for all human services without regard to income eligibility criteria, planning for and implementation of I&R under Title XX has not focused on day care.

One exception is the State of California which, under innovative child care legislation passed in 1976 (AB 3059), supports the operation of 31 CCIR services and is currently developing a set of policies for CCIR which may have an influence on federal policy-making. Senator Cranston (D-California) made CCIR services a prominent feature of his recently introduced legislation, The Child Care Act of 1979, and it is likely that CCIR will be included in future legislative initiatives.

2. CCIR as an Instrument of Federal Policy

At the beginning of the 1970s, enactment of legislation to establish a comprehensive national day care program seemed imminent. Although there continue to be advocates of such legislation a decade later, federal attention has shifted from the development of a comprehensive national program to the development of mechanisms for maximizing the efficiency, quality, and availability of existing services.

Interest in CCIR has emerged as a federal policy option in recognition of its potential for addressing many of the issues central to the provision of day care and other social and health services:

- *Access to Services* - Increasing citizens' access to the proliferating service delivery system is one of the highest priority issues for the President's Task Force on Reorganization, housed in the Office of Management and the Budget (OMB), and for the Office of the Assistant Secretary for Planning and Evaluation in HEW. Through its outreach efforts, CCIR offers a possible means of simplifying access to child care and related health and social services.
- *Maximizing Utilization of Services (Balancing Supply and Demand)* - Disagreement about the adequacy of the national supply and the extent of potential demand for day care persists and shows no sign of abating. One analyst (Keyseling, 1977) has considered the future demand to be the difference between the number of children of working parents and the number of licensed spaces in regulated child care. This approach assumes that in-family resources and the non-regulated forms of child care which exist are either not available or not acceptable. Examining the same data, other analysts concluded

that working parents all have some kind of child care arrangement and, therefore, that no new day care or subsidy is needed (Larson, 1975; Woolsey, 1977).

Despite this persisting disagreement as to whether there are imbalances in the nationally aggregated supply of and demand for child care, virtually all commentators agree that there are *local* and *seasonal* imbalances in supply and demand. Child care information and referral services are designed to address such imbalance. They attempt to identify child care resources that would otherwise be unknown to parents. In so doing, CCIR has the potential for maximizing the use of existing child care slots in both day care centers and family day care homes, thereby reducing expenditures on new services. When supply is inadequate, some CCIR services may facilitate the development of new resources.

- *Decategorizing Services* - Local purchase of service practices have, in some instances, led to the segregation of children by social class into two streams of child care — a subsidized one used primarily by low income groups and a private one used primarily by the middle class. The fact that information and referral is one of the few Title XX services that must be provided without regard to income is evidence of Congressional interest in decategorizing social service programs. CCIR represents a potentially viable mechanism for combining the two streams of child care into a universally accessible child care service system.
- *Parental Choice* - CCIR can increase the choices open to parents and, in so doing, may offset fears that any national child care policy represents an intrusion of the state into the family. Moreover, CCIR may represent a mechanism for respecting individual and cultural differences among parents and children and for encouraging the type of matching between caregiver and child that researchers have found to be so important for child development. As Dr. Alison Clarke-Stewart (1978) states in her comprehensive review of child development research, *Child Care in the Family*,"We know that children develop better in environments or with caregivers that 'match' their needs and abilities. ...A variety of programs is called for to meet the needs of different families and different children, in different circumstances, with different cultural values." CCIR could enable parents to choose the programs or settings that are most appropriate for their children.
- *Quality of Care* - Child care policy-makers, planners and advocates in this country have expressed concern over the quality of care available to parents. By making technical assistance and caregiver training available to licensed and non-licensed providers on a voluntary basis, CCIR might be used as a vehicle for improving the quality of child care. Further, it might be used to provide information to parents

about quality, thereby helping to regulate and upgrade programs through parental selection. Finally, CCIR might prove to be an effective means of identifying unlicensed and unregistered family day care homes and bringing them into the stream of licensed and registered care.

- *Planning* - A major factor which has impeded United States child care policy has been the difficulty in predicting the ultimate price tag for federally subsidized services. Because there is no absolute number representing demand, the need for subsidy may fluctuate in ways that are impossible to predict. In order to develop realistic incremental/decremental approaches to planning, detailed information is needed regarding consumer behavior in seeking services and expressing preferences. For purposes of planning, CCIR may provide a means of collecting local data regarding imbalances between supply and demand.
- *Coordination* - Since day care consists of such a large number of provider units, the provision of specialized support services must be efficient. CCIR may promote economies of scale in such areas as joint-purchasing, sharing of support services, and linking with community resources.

3. Policy Research Issues

Although CCIR has been proposed as a mechanism for making the child care system work more efficiently, very little is known about how CCIR services currently operate. Much of this lack of information is due to the fact that agencies providing CCIR rarely have the funding, staffing, or technical ability to evaluate their services. The only outside examination of CCIR to date has been Abt Associates' 1978 descriptive study of California's Alternative Child Care Program, which concluded that CCIR programs "engage in a wide variety of activities beyond referrals for child care" and that "programs with larger funding levels have three times greater requests for referrals, larger listings, and larger staff than those with small funding levels" (Warner, 1979). There is very little information available regarding the magnitude or distribution of CCIR services nationally, the parents they serve, the functions they perform, their effectiveness in linking parents with child care providers, or their costs. In short, there is little existing information on which to base policy decisions regarding CCIR services.

Central among the questions which need to be answered for the development of a federal policy regarding CCIR are the following:

- How many organizations currently provide CCIR to parents? What types of organizations provide it? How are they financed? How many calls do they receive? How large a geographic area do they cover? What information are parents seeking? What information is provided? How diverse is the population served?

- What are the effects of CCIR; i.e., does CCIR make a difference? What does it do for individual parents, child care providers, and for the community that is not done without it? What is the impact of CCIR on the utilization of child care support services? What is its impact in terms of balancing local child care supply and demand?
- What does CCIR cost? Is CCIR cost effective? Is CCIR a cost effective vehicle for increasing parents' access to other child-related social and health services?
- Are some CCIR activities or forms of delivery more effective than others? Are they differentially effective for different subpopulations (e.g., middle-income versus low-income families) and/or different types of communities (e.g., urban versus rural)? How can the most effective be promoted?

In order to influence service development via funding or regulation, the federal government needs information about those aspects of CCIR which are most susceptible to regulation and which will produce the most positive outcomes. Given how little research attention has been given to CCIR, *Project Connections* represents a unique opportunity to gather and assess policy-relevant information regarding child care information and referral. Phase I of the study has gathered baseline data regarding the extent, variety, and functions of CCIR services in the United States. Building on these data, subsequent phases of the study will examine the costs and effects of different types of CCIR and will produce policy recommendations for the federal government with respect to these services.

4. Usefulness to Policymakers

While it is too soon to specify the ways in which the study findings can or will be applied, it is possible to outline a range of policymakers' responses to potential outcomes of the study.

Should CCIR appear to be generally effective and efficient, the federal government might wish to consider different ways of supporting the organizations which supply it. The government would then need to know which types of organizations are most effective; which features of these organizations contribute to their effectiveness; and whether these features could be replicated in other settings.

Having gathered such information, federal involvement might take several forms. Among them are the following:

- *Financial Support:* Given the limited amount of funds available, the federal government will face the question of how many CCIRs to support, where to support them, and how much they should cost. Such financial assistance could be offered to CCIR services in a variety of ways:
  - Funds could be provided directly to CCIR organizations, as they

have been in California;
- Demonstration funds could be provided in order to stimulate interest of other funding bodies in CCIR; and
- The federal government might share in the funding of CCIR organizations, requiring matching funds from states, local communities, or private agencies such as United Way.

- *Technical Assistance*: Even without federal financial support for CCIR, the federal government might promote the further development of these services through technical assistance. As a result, states might be more inclined to use their Title XX money for this service, more United Way support might be committed, and local communities might use some of their resources. Forms of technical assistance might include:
  - publicizing the value of CCIR;
  - offering training conferences;
  - supporting demonstration models; and
  - developing how-to handbooks.
- *Regulation:* At the present time, there are no guidelines or requirements for state use of Title XX money for CCIR or general information and referral (I&R). Similarly, there is no monitoring of the effectiveness of Title XX money for I&R. By determining which CCIR activities or components are the most effective and cost-efficient, *Project Connections* could lay the groundwork for regulations that promote effective I&R.

  Governments might enact CCIR regulations, making compliance with them a pre-condition for the funding of CCIR services. The types of characteristics subject to regulation might include the following:
  - referrals to unlicensed care;
  - discriminatory placements or referrals;
  - geographic area covered;
  - types of information collected regarding providers;
  - types of follow-up activities; and
  - evaluation efforts.

NOTES TO CHAPTER I

1 For purposes of this project, the term "Child Care Information and Referral" (CCIR) refers to any service which helps parents to find child care arrangements.

Inclusions:

- Giving parents the names of potential providers of child care.
- Giving information about child care programs.
- Helping parents to evaluate child care programs.

Exclusions:

- Helping parents only to find occasional baby-sitters.
- Referring parents only to providers within the organization providing CCIR (e.g., Headstart referring parents only to Headstart programs).
- Funding or "lending" resources (such as personnel, telephone lines, office space) to another organization which provides CCIR.
- Sub-contracting CCIR to another organization.
- Referring *only* parents who are members or employees of the organization (e.g., church members, employees of the organization providing child care).
- Referring parents *only* to another organization which provides CCIR ("secondary referrals").

2

Profile of Child Care Information and Referral Services

A. METHODS OF DATA COLLECTION[1]

During Phase I, two types of data collection approaches were used to develop a national profile of the distribution and characteristics of CCIR services. The main approach was a telephone survey of organizations within a nationally representative sample of human service delivery units (referred to as "catchment" areas). The second approach was in-depth case studies of CCIR services in five communities.

The telephone survey involved four stages. During the initial stage, a search procedure was instituted in a nationally representative sample of 92 catchment areas. The sociodemographic characteristics of the 92 catchments are compared to the characteristics for all catchments in **Table I.** Agencies within the catchment considered to be potential sources of information regarding the local social services network (United Way, Title XX offices, etc.) were contacted by telephone and asked for names of organizations within the catchment providing CCIR services. In the second stage, all nominated organizations were screened, their status as providers of CCIR services was determined, and some basic information regarding their functions was obtained. The process was continued until all potential sources of CCIR within the catchment area had been identified and contacted. In the 92 catchments sampled, a total of 326 CCIR organizations were identified.

During the third stage, in-depth, one-hour telephone interviews were conducted (in 1978) with 131 of the 326 CCIR organizations. In the final stage, one-half hour update interviews were conducted (in early 1979) with the same subsample of 131 organizations. The sampling for the in-depth telephone interviews was based upon a classification system which categorized organizations according to their orientation, mission and level-of-effort in CCIR. The criteria for classification were as follows:

- *Primary Organization.* An organization was classified as "Primary" if it (1) defined its primary mission as providing information and/or referral for child care on a regular basis; and (2) was a distinct unit that

had the authority to determine how CCIR would be implemented. This group consisted mostly of organizations specializing in CCIR.

- *Major Organization.* An organization was categorized as "Major" if it was not a Primary organization and if it satisfied one or both of the

Table 1

Comparative Mean Values of Selected Socio-Demographic Characteristics: 92 Sampled Catchments and All U.S. Catchments, 1970

Selected Sociodemographic Variables	Mean of Sampled Catchments (Mean Population: 139,219.16)	Mean of all Catchments (Mean Population: 132,211.00)
Percentage of Black Households	8.46	10.55
Percentage of Persons of Spanish Heritage	3.29	4.59
Median Household Income	$8,313.75	$7,780.00
Median School Years Completed	11.68	11.59
Median Household Size	2.81	2.75
Percentage of Population in Overcrowded Housing	16.31	17.47
Percentage of Population in Rural Area of Catchment	30.84	30.86
Percentage of Families with Children	56.16	55.04
Percentage of Female-headed Households w/child under 18	9.72	10.78
Percentage of Working Mothers w/child under 18	40.83	40.85
Percentage of Working Mothers w/child under 6	30.70	30.83
Percentage of Families At or Below the Poverty Level	10.63	11.24

[a]Source: Bureau of the Census, U.S. Department of Commerce, 1970

following criteria: (1) received 20 or more requests for CCIR in an average week; or (2) devoted 40 or more person-hours to CCIR in an average week.

- *Minor Organization.* An organization was classified as "Minor" if CCIR was available on a regular basis and if both of the following criteria were satisfied: (1) received fewer than 20 calls for CCIR per week; and (2) devoted less than 40 person-hours in an average week.

Of the 326 organizations surveyed which provide some amount of CCIR, 15 were Primaries, 85 were Majors, and 226 were Minors. The 131 in-depth interviews were conducted with all 15 of the organizations classified as Primary, and with a randomly selected sample of those classified as Major (47) and Minor (69). The findings reported in this chapter are based upon data received in the screening interviews with the 326 organizations and in the in-depth interviews with 131 organizations.

The response rate in the survey was exceptionally high. Virtually every organization contacted was interviewed. Given the good response rate and the random nature of the sampling procedures utilized, the organizations surveyed are assumed to be representative of the organizations offering CCIR in the United States. The data gathered in the telephone survey formed the basis for the development of a national profile of current CCIR services.

In addition to the telephone survey, in-depth field data were gathered in five communities. The on-site visits allowed for a more complete and multi-perspective view of different models of child care information and referral agencies and of the child care systems in which they operate. The on-site visits were conducted in Portland, Oregon; Nashville, Tennessee; San Francisco and Contra Costa, California; Westmoreland County, Pennsylvania; and Tompkins County, New York. At each site, the field investigators interviewed staff at CCIR organizations, licensing agency employees, child care providers, parents, and community leaders.

The national profile of CCIR services presented below is based primarily on the findings from the telephone survey, but is enriched by insights obtained during the more intensive field visits. The profile addresses three broad areas, each of which provides a somewhat different perspective on CCIR: (1) Scope, Variety and Distribution of CCIR Organizations; (2) Organizational Characteristics; and (3) the Information and Referral Process. Each of these is discussed in detail below.

B. SCOPE, VARIETY AND DISTRIBUTION OF CCIR ORGANIZATIONS

1. Number of CCIR Organizations in the U.S.

Based on statistical projections from the telephone survey data (with 95 percent confidence limits), it is estimated that there are approximately

6,390 organizations in the United States providing some CCIR services. Of these, it is projected that 1,585 (25 percent) are Major CCIR organizations and 4,650 (73 percent) are Minors.[2] While the number of Primaries in the survey sample was too small to make reliable projections of the total number of Primaries in the U.S., the *Project Connections* staff, based on their expertise in and knowledge of CCIR operations independent of this survey, estimates that there are approximately 50 to 60 Primaries currently in operation.

Table 2

Distribution of Organizations Providing CCIR Services, By Primary/Major/Minor Classification[a]

Functional Type of Organization		Primary (N=15)	Major (N=85)	Minor (N=226)	Total (N=326)
Child Care Information and Referral Agencies	(N=15)	100.0%	0.0%	0.0%	4.6%
Direct Providers of Child Care Services	(N=42)	0.0%	15.3%	12.8%	12.9%
Head Start Programs	(N=34)	0.0%	10.6%	11.1%	10.4%
Child Care Licensing Agencies	(N=55)	0.0%	24.6%	15.0%	16.9%
Child Care Coordinating Agencies	(N=16)	0.0%	9.4%	3.5%	4.9%
General I & Rs	(N=14)	0.0%	3.5%	4.9%	4.3%
Welfare Agencies	(N=37)	0.0%	13.0%	11.5%	11.3%
Health & Mental Health Agencies	(N=23)	0.0%	4.7%	8.4%	7.1%
United Ways	(N=9)	0.0%	2.4%	3.1%	2.8%
Family & Child Services	(N=5)	0.0%	3.5%	0.9%	1.5%
Other Social Services Agencies	(N=29)	0.0%	9.4%	9.3%	8.9%
Educational Organizations	(N=16)	0.0%	2.4%	6.2%	4.9%
Libraries	(N=9)	0.0%	1.2%	3.5%	2.8%
Other Organizations	(N=22)	0.0%	0.0%	9.8%	6.7%
TOTAL	(N=326)	100.0%	100.0%	100.0%	100.0%

[a]Source: 1978 screening interviews

2. Organizational Settings and Auspices of CCIR

With regard to the issue of organizational setting, the hallmark of CCIRs appears to be diversity. Among the wide variety of organizations involved in the provision of child care information and referral are Primary CCIR agencies; child care centers; nursery schools; Head Starts; Community Action Programs; churches; United Ways; public welfare departments; private social service agencies; and various women's organizations. The most prevalent types of organizations providing CCIR were direct providers of child care(12.9%); welfare agencies(11.3%); child care licensing agencies(16.9%); and Head Start programs (10.4%), as shown in **Table 2.**

In addition to Primary CCIR organizations, the other types of organizations most likely to have a major involvement with CCIR (those classified as Majors) were direct providers of child care services (e.g., Head Starts and day care centers), child care licensing agencies, and Welfare agencies. By contrast, the types of organizations with the lowest level of involvement in CCIR — even though they provided *some* CCIR — were general I&R services and non social service agencies (e.g., Chambers of Commerce, libraries).

Slightly more than half (56%) of all organizations providing CCIR were private organizations, while the remaining 44 percent were within the public sector. All of the Primaries were private organizations **(Table 3).**

3. Regional Distribution of CCIR Organizations

In the four-category group of states used by the United States Bureau of the Census (North East, North Central, West, and South), catchments in the North Central states differed slightly from those in the other three groupings with regard to their distribution of Primary, Major and Minor CCIRs.

Table 3

Public[a] Versus Private Auspices of Primary, Major, and Minor CCIR Organizations[b]

Auspices of Organization	Primary	Major	Minor	Total[c]
Private	15 (100%)	20 (42.6%)	37 (56.1%)	72 (56.2%)
Public	0 (0.0%)	27 (57.4%)	29 (43.9%)	56 (43.8%)
TOTAL	15	47	66	128

[a]Organizations were classified as "Public" if they indicated that they were a part of local, state or federal government.

[b]Source: 1979 update interviews

[c]The total number of organizations varies from table to table due to nonresponse to certain questions by some organizations.

They had no Primaries and a smaller proportion of Majors **(Figure 1)**. At the same time, the North Central region had the largest absolute number of CCIR organizations (96).

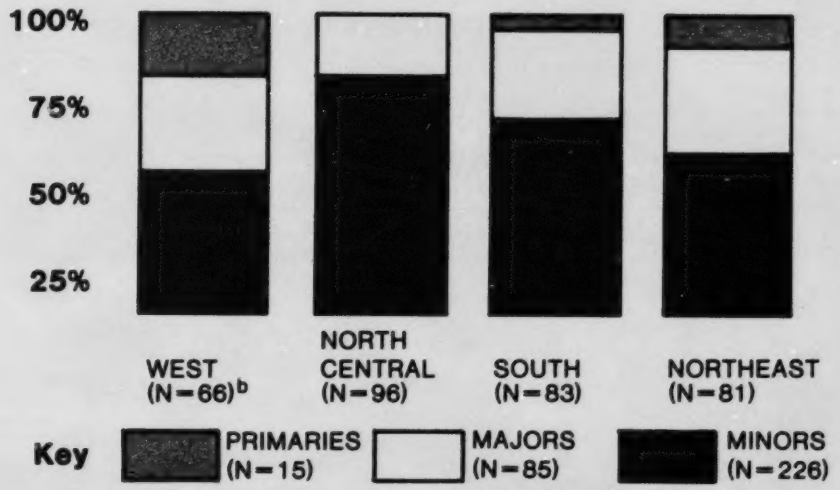
On the other hand, the Western region, which had the smallest absolute number of CCIRs (66),had a significantly greater percentage of Primaries and a significantly lower percentage of Minor organizations. Nearly three out of four of the Primary organizations in the sample were located in the Western region. The high concentration of Primaries in the Western region was accounted for largely by the number of Primaries in California. Ten of the 15 Primaries in the survey sample were located in that state.

4. Sociodemographic Distribution of CCIR Organizations

The data were analyzed to ascertain if there were any patterns or trends in the delivery of CCIR that might be associated with sociodemographic characteristics of the catchment. The selection of sociodemographic characteristics was based upon their use in the past as indices or proxies of day care need (population size and density; proportion

Figure 1

Percentage of Primary, Major, and Minor Organizations byRegion[a]



[a]Source: 1978 screening interviews
[b]N = Total number of CCIR organizations in the sample per region

of children, working mothers, and low-income residents in the local population; and minority/ ethnicity composition).

For most of the sociodemographic characteristics examined there were no significant correlations with the distribution of organizations providing CCIR. That is, the number and type of CCIR organizations were unrelated to the percentage of working mothers, the minority composition, and the percentage of female-headed households in the catchment areas. However, distributional variation was found to be associated with two characteristics that may be of relevance for federal policy: population density (urban-rural) and income level.

As shown in **Table 4**, there tended to be a larger average number of organizations providing CCIR services in predominantly rural catchments (4.9) than in urban (3.4) or "mixed density" (4.2) catchments. Primary organizations were found only in catchments with a high concentration of urban population, while Minor organizations were more common in rural than in urban catchments. Major CCIR organizations were fairly equally distributed among the catchments with different population densities.

In terms of income level, catchments categorized as below-average-income had a substantially higher average number of CCIR organizations (an average of five) than above-average-income catchments (an average of 3.6). This distribution resulted primarily from the larger number of Minor CCIR organizations located in below-average-income areas **(Table 5)**.

5. Population Served

Given the federal government's concern for equity of service and access to service, it is important to know not only how CCIR organizations are distributed throughout the country, but also which ethnic and socioeconomic groups are served at a given site. During the telephone

Table 4

Average Number of Primary, Major, and Minor CCIR Organizations Per Catchment, by Population Density of Catchment[a]

Population Density Category of Catchment[b]	Primary	Major	Minor	All Organizations
Rural (41%)[c]	0.0	0.9	4.0	4.9
Mixed (13%)	0.0	1.0	3.2	4.2
Urban (46%)	0.2	1.1	2.1	3.4

[a]Source: 1978 in-depth interviews

[b]A catchment was categorized as "urban" if 20 percent or less of its population lived in a rural area; as "rural" if more than 40 percent lived in a rural area; and as "mixed" if more than 20 percent but less than 40 percent lived in a rural area.

[c]The percentage of sampled catchments in the specified population density category.

interviews, CCIR respondents were asked to estimate the percentage of their clients in various ethnic and income groups. Most organizations stated an intention of serving the entire spectrum of ethnic and economic groups within their communities.

The respondents' estimates suggest that the clientele of CCIRs is mixed, both in terms of ethnicity and income, although it should be noted that the data were based primarily upon respondents' impressions and only rarely on concrete information obtained from the parents. Approximately 60 percent of all organizations interviewed indicated that the *majority* of their clients were white, and approximately 20 percent reported that the *majority* of their clients were either Asian, Black, or Spanish American. Further analyses were performed to determine if the ethnicity of an organization's clients was related to its level of effort in CCIR. Primary CCIR organizations were more likely than other organizations to have a large percentage of minority parents among their clients. Approximately 40 percent of the Primaries indicated that the majority of their clients were non-white, compared with 23 percent of the Majors and 18 percent of the Minors **(Table 6).**

With respect to various income groups, more respondents indicated having larger percentages of poverty-level parents as clients than low, middle and high-income clients. Nearly 40 percent of all CCIR organizations reported that the majority of the parents using their child care information and referral services had poverty-level incomes, compared with only 16.7, 13.4 percent and .9 percent of the organizations which reported a majority of lower-income, middle-income and high-income clients, respectively **(Table 7).**

Table 5

Average Number of Primary, Major, and Minor CCIR Organizations Per Catchment, by Income Category of Catchment[a]

Income Category of Catchment[b]	Primary	Major	Minor	All Organizations
Below Average Income Catchments (45%)[c]	0.0	.9	4.1	5.0
Above Average Income Catchments(55%)	0.2	1.2	2.3	3.6

[a]Source: 1978 in-depth interviews

[b]Income level of catchments was dichotomized at the average median income of all catchments.

[c]The percentage of sampled catchments in the specified income category.

Parents with poverty-level incomes were most likely to constitute the bulk of clients in Major (43.2%) and Minor (39.1%) CCIR organizations. Primaries tended to a greater degree than Majors or Minors to serve lower income families (23.1% versus 14.0% and 17.2%).

Table 6

Percentage of Primary, Major, and Minor CCIR Organizations Having *More Than Half* of Their Clients From Various Ethnic Groups[a]

Ethnic Group	Primary (N=13)	Major (N=44)	Minor (N=64)	All Organizations[b] (N=121)
Asian American	15.4%	0.0%	1.6%	2.5%
Black American	25.0%	20.5%	12.7%	16.8%
Caucasian	41.7%	63.6%	59.4%	59.2%
Native American	0.0%	0.0%	0.0%	0.0%
Spanish American	0.0%	2.3%	3.1%	2.5%

[a]Source: 1979 update interviews
[b]The total number of organizations varies from table to table due to nonresponse to certain questions by some organizations.

Table 7

Percentage of Primary, Major, and Minor CCIR Organizations Having *More Than Half* of Their Clients From Various Income Groups[a]

Income Group	Primary (N=13)	Major (N=44)	Minor (N=64)	All Organizations (N=121)
Poverty Level (<$7500)	7.7%	43.2%	39.1%	37.2%
Lower Income ($7500-16,000)	23.1%	14.0%	17.2%	16.7%
Middle Income ($16-30,000)	7.7%	14.0%	14.3%	13.4%
High Income (>$30,000)	7.7%	0.0%	0.0%	0.9%

[a]Source: 1979 update interviews
[b]The total number of organizations varies from table to table due to nonresponse to certain questions by some organizations.

C. ORGANIZATIONAL CHARACTERISTICS OF CCIR

1. Organizational Structure

The survey of organizations offering child care information and referral services revealed a highly complex service delivery system for the U.S. as a whole. The diversity of the type of organizational settings in which CCIR is found, as shown earlier in Table 2, was matched by the diversity of organizational structures within which the services functioned. There does not appear to be a standard structure within which CCIR services are currently operating.

Some organizations were small, autonomous agencies specializing either in CCIR or other child-care related concerns. Many organizations, on the other hand, were large governmental agencies or departments which offered CCIR services as an offshoot of other services, sometimes in more than one department. In such situations, respondents typically knew little about the structure of the organization as a whole, or how the CCIR operation functioned within the larger unit. Some CCIR operations were storefront agencies affiliated with some larger organization (such as a YMCA or United Way) but functioning fairly independently. In some communities, several organizations pooled their resources and operated a single CCIR service through an answering service arrangement. Finally, in yet another type of operation, a person (or persons) knowledgeable about child care services in the community was shared by several organizations, sometimes on a rotating basis.

2. History of Service Development

Nearly two-thirds of the organizations offering CCIR services had been established within the past 10 years. Primary CCIR organizations were particularly likely to have been instituted within the past decade.

The introduction of CCIR services in an organization tended to fall into one of two predominant patterns. The first pattern involved the initiation of service *de novo* in a new organization. This kind of service initiation appeared to require intense effort by a person who played an entrepreneurial and nurturing role. Most Primaries followed this first pattern of development. The second pattern involved the gradual extension and evolution of services in existing organizations. Usually, the existing staff of the organization assumed the CCIR function. Most of the Major and Minor organizations began their CCIR services in this fashion.

3. Range of Services

The services provided by almost all organizations surveyed (99 percent) extended beyond CCIR. This finding is not surprising inasmuch as most organizations provided CCIR services as adjuncts to other types of

service. Six major categories of these services which are relevant to either child care or information and referral functions have been identified (**Table 8**) and are described below:

- *Direct Child Care Services*: Approximately one-third of all organizations were direct providers of child care services. Primary CCIR organizations rarely provided direct child care.
- *Support Services for Providers of Child Care*: Approximately 75 percent of the organizations offered various services to child care providers. Among the services offered were workshops, toy-lending libraries, start-up help, caregiver training, and assistance with licensing, fund-raising, or administration. Primaries generally provided the greatest range of these services, and a higher percentage of Primaries than Majors or Minors were engaged in such activities.
- *Education/Support Services for Parents*: Over 60 percent of the surveyed organizations offered workshops and other educational services for parents. Approximately half provided workshops for all parents; about 20 percent provided special workshops specifically for single parents. Primaries were considerably more likely than either Major or Minor organizations to offer this type of service to their clients.
- *Printed Materials*: Some types of printed materials were available at

Table 8

Percentage of Primary, Major, and Minor Organizations Offering Selected Non-CCIR Services[a,b]

Type of Service	Primary (N=15)	Major (N=47)	Minor (N=69)	All Organizations (N=131)
Direct Child Care Services	6.7%	34.0%	33.3%	30.5%
Support Services to Providers	93.3%	82.9%	65.2%	74.8%
Educational Services for Parents	83.3%	54.3%	63.7%	62.2%
Printed Materials to Parents	100.0%	84.8%	72.5%	79.5%
Advocacy for Child Care	91.7%	65.2%	56.5%	63.0%
I & R Other Than Child-Care Related	73.3%	80.9%	94.2%	87.0%

[a]Source: 1979 update interviews

[b]The percentages do not add to 100% since organizations were frequently involved in two or more other services.

approximately two-thirds of all organizations. These materials ranged from child care directories and newsletters to information concerning child development and statistical profiles regarding the availability and need for child care. Almost half of the organizations maintained a library regarding child development or related topics; a similar percentage published their own directory of local child care services. Organizations specializing in CCIR were the most likely to have a range of printed materials available for parents, including statistics regarding child care needs.

- *Advocacy*: Some form of advocacy was undertaken by about 60 percent of the organizations. Almost 92 percent of Primary CCIR organizations had made efforts to influence child care policy through lobbying, public speaking, and the like. Major and Minor CCIRs were found to engage in advocacy-related activities somewhat less often.
- *I&R Other Than Child Care*: Over 85 percent of all surveyed organizations provided information and referral regarding medical services, housing, jobs in child care or other fields, eligibility for WIN or CETA and the like. Referral to child care jobs was most frequently made by Primaries; referral to medical services was most frequently made by either Majors or Minors, many of which were health or social service agencies.

The data collected in the telephone survey indicated that Primaries, to a greater extent than Majors or Minors, serve as a community resource for child-care related services. The on-site visits suggested that the Primaries not only offer more child-care related support services than Majors and Minors, but also offer them more actively, more frequently, and more extensively.

4. Person-Hours Devoted to CCIR

CCIR organizations devoted an average of 49 person-hours per week to responding to parents' requests for child care information and referral. The number of person-hours spent on CCIR requests varied with the organization's level of effort.

Primary organizations devoted an average of 139 person-hours to CCIR weekly, nearly three times as many person-hours as did those organizations classified as Majors. On the average, Major CCIR organizations spent 50 person-hours per week on child care information and referral. Minor CCIR organizations devoted an average of 20 per week to CCIR.

5. Volume of Requests

According to responses to the telephone interview, the number of requests for child care information and referral ranged from approximately one to 500 per week. The organization's level of effort accounted for sub-

stantial differences in the volume of requests. Primary CCIR organizations reported receiving an average of *115* requests per week, which is more than twice as many as the average of *45* per week received by Majors and more than ten times as many as the average of *11* per week received by Minors.

6. Finances

Many respondents were able to make rough budget estimates of certain levels of their organization's operations. However, due to the complexity of the structure and the size of many organizations, these estimates did not always refer to the same level at different agencies, and were therefore difficult to analyze and interpret. Only in the case of Primary organizations, whose budgets reflected CCIR activities more directly than those of Majors and Minors, were meaningful financial data available. Primaries reported an average annual budget of $188,016, of which an average of approximately 60% was devoted directly to CCIR services.

7. Sources of Funding

Most organizations were supported by several funding sources, no one of which was sufficient to sustain the service at its current level. Government was the most frequent source of funding. Federal and state funding programs were among the sources of support for over half of the organizations **(Table 9)**. Only two of the Primaries obtained federal funds, though over half obtained state funding.[4] Other sources of public funds that provided support for some of the surveyed organizations included city or town governments.

Twenty-seven percent of all organizations surveyed used Title XX funding for their CCIR operations. Organizations within the public sector were significantly more likely to use Title XX monies than were private sector organizations. Furthermore, Title XX funding was more common in Major and Minor organizations. Approximately 30% of the Major and Minor organizations reported Title XX as a source of funding, compared with 6.7 percent for Primary CCIRs **(Table 10)**.

Private sources of support for CCIR included foundation grants, citizen donations, in-kind donations (usually by the staff), and — for those organizations which offered I&R in conjunction with the provision of direct child care services — parent fees. None of these, however, constituted a major source of funding for the organizations as a group. Primary organizations were considerably more likely to obtain funding from private sources (particularly from foundations) than were Major or Minor organizations.

About five percent of all organizations had no specific funding for their CCIR service, but covered the costs with funds allocated to other, usually related, services. Over 15 percent of the organizations, however, claimed that they could not cover their costs within their current budgets.

Funding arrangements were found to be more intricate than other features of organizational structure. Several organizations were funded by means of a set of contractual and informal arrangements. Contracts often interlocked and involved matching funds. Thus, a given organization was sometimes the recipient of a subcontract, a direct contract, a grant, and/or several small local sources of funds. Complex funding arrangements tended to be more common in the private than in the public sector.

D. INFORMATION AND REFERRAL FUNCTION AND PROCESS

During the telephone interviews, a considerable amount of data was also collected concerning the process of child care information and referral. In the presentation of data which follows, the core CCIR process has been split into four separate components, each of which represents one step in

Table 9

Percentage of CCIR Organizations Receiving Specified Types/Sources of Funding, by Primary/Major/Minor Classification[a,b]

Type/Source of Funding	Primary (N=12)	Major (N=44)	Minor (N=67)	Total (N=123)[d]
Government				
Federal (including Title XX)[c]	16.7%	70.5%	58.2%	58.5%
State	58.3%	61.4%	50.8%	55.3%
City/Town	41.7%	29.6%	25.4%	28.5%
Private				
Community Groups/Clubs	8.3%	4.6%	1.5%	3.3%
Parents' Fees	8.3%	9.1%	22.4%	16.3%
Provider Fees	0.0%	4.6%	3.0%	3.3%
Donations	16.7%	6.8%	14.9%	12.2%
Private Foundations	33.3%	4.6%	10.5%	10.6%
Industry	8.3%	47.6%	3.0%	4.1%
Church	0.0%	4.6%	1.5%	2.4%
In-Kind Donations	16.7%	9.1%	7.5%	8.9%

[a]Source: 1978 In-depth interviews

[b]Percentages do not add to 100% because most orgnizations reported having more than one source of funding.

[c]Does not include CETA-funded staff. CETA monies were reported by 41.7% of the Primaries, 13.6% of the Majors and 13.4% of the Minors.

[d]The total number of organizations varies from table to table due to nonresponse to certain questions by some organizations.

the sequence of helping parents to find child care: gathering information about child care providers; maintaining visibility for consumers; matching parents with child care providers; and performing follow-up activities. Each of these is described below.

1. Gathering Accurate Information about Local Child Care Options

The ability to give parents accurate information regarding a variety of child care options is the basic component of the I&R function. Activities involved in this aspect of the CCIR operation include developing lists of providers, updating lists, screening providers for inclusion on the list, and gathering additional information about the features of the providers' services and programs **(Table 11)**.

Nearly all (90.5 percent) of the organizations (all of the Primaries) maintained a list of local child care providers which they used for referrals. Of those agencies which had lists, 92 percent had checked within the previous 12 months to verify that the information on the list was still correct.

The majority of organizations (69.8%) had fewer than 100 providers on their referral lists. In fact, over half of the CCIR organizations listed 30 or fewer local providers of child care. The size and informational quality of the lists tended to be associated with the type of organization.

Minor organizations were found to have the smallest referral lists: the average size was 51 child care providers, though over half had 20 or fewer names on their list. Only 11.9% of the Minors had more than 100 names on their referral lists. In addition, Minors tended to depend on a list from the licensing authority which they did not augment. These Minor organizations tended to refer to a narrower range of care than Primaries and Majors, and often did not refer to family day care. They frequently did not take steps to

Table 10

Percentage of Primary, Major, and Minor Organizations Receiving Title XX Funds for CCIR, by Public or Private Auspices[a]

Auspices	Primary (N=15)	Major (N=45)	Minor (N=64)	All Organizations[b] (N=124)
Private (N=72)	6.7%	10.0%	18.9%	13.9%
Public (N=52)	0.0%	40.0%	48.2%	44.2%
Public and Private Organizations (N=124)	6.7%	26.7%	31.3%	27.0%

[a]Source: 1979 update interviews

[b]The total number of organizations varies from table to table due to nonresponse to certain questions by some organizations.

ensure the reliability of their information; almost one-third of the Minors depended solely on lists from secondary sources. Moreover, these Minor CCIRs did not typically do any screening: fewer than half reported that they screened before adding providers' names to lists, and some 60 percent never assessed quality under any circumstances.

Major organizations had an average of 300 names on their referral lists, though fewer than half had 100 or more names on their lists. Majors usually referred to several types of care including centers, homes, infant care, after-school care, and special needs care. They rarely developed original referral lists, but many had obtained their lists from several sources (e.g., welfare, licensing, professional groups). Almost all the Majors with formal lists (95.2%) had verified the accuracy of their lists within the previous 12 months. Additionally, more than a third reported that they routinely checked on the quality of the providers on their referral lists, and some 49 percent screened providers (most commonly with a personal visit) before they added them to their list.

Table 11

Percentage of Primary, Major, and Minor CCIR Organizations Performing Various Information-Gathering Functions and Activities[a]

Information Gathering Function/Activity	Primary (N=15)	Major (N=47)	Minor (N=67)	All Organizations (N=129)
Maintain a formal list of local child care providers	100.0%	98.8%	86.7%	90.5%
Verified that list was accurate within previous 12 months	100.0%	95.2%	90.2%	92.1%
Have over 100 providers' names on their list	73.4%	42.6%	11.9%	30.2%
Always or usually screen providers before listing them	58.9%	48.9%	42.9%	46.6%
Referral lists do *not* include unlicensed day care *centers*	66.7%	78.1%	76.1%	75.9%
Referral lists do *not* include unlicensed day care *homes*	30.0%	63.9%	56.8%	56.6%

[a]Source: 1978 in-depth interviews and 1979 update interviews

Primary organizations had the largest referral lists: nearly three-quarters of them had over 100 names. In fact,the majority of Primaries had over 200 providers on their lists. Moreover, they generally referred to a broad range of care that almost always included homes, centers, infant care, after-school care, and special needs care. They frequently developed original referral lists and often added provider names to them from several sources. Only these organizations, as a group, were found to seek out providers actively. In addition, over half screened providers (usually by personal visits) before adding their names to the lists.

Respondents were also questioned about their organization's policies regarding referral to unlicensed care. Over 75 percent of organizations included in the survey had a policy of not referring parents to unlicensed day care *centers*. However, organizations generally had a more flexible policy regarding unlicensed homes than unlicensed centers. Most Primaries reported that they did not refer to unlicensed centers but made an active attempt to bring unlicensed homes into the licensed supply through assistance with the licensing process. The majority of both Major and Minor organizations referred solely to licensed care and were less frequently involved in assisting providers with licensing than were Primaries.

2. Maintaining Visibility and Accessibility for Consumers

Maintaining visibility and accessibility to parents seeking child care is a second main component of the CCIR function. While the initiative for contacting an organization obviously rests with the consumer, there are various ways in which CCIR organizations can become known to potential users.

According to the survey results, parents usually hear about CCIR organizations by word-of-mouth; 43 percent of the organizations reported this as the most frequent method by which people find them. The more an organization was involved with CCIR, the less it relied upon word-of-mouth; 25 percent of the Primaries, compared with 37 percent of the Majors and 51 percent of the Minors, cited word-of-mouth as the most frequent method by which parents learned about their CCIR services.

CCIR organizations used a variety of methods to publicize their information and referral services. Among the most common approaches were listings with other organizations, posters or leaflets, and publicity in newspapers or magazines **(Table 12)**. Primary organizations tended to use a wider variety of methods to publicize their services, and were more likely to use any given method, than were Major and Minor organizations. For example, almost all (93 percent) of the Primaries advertised their services in the Yellow Pages of the telephone directory, but only about one-third of the Majors and one-fourth of the Minors used this method. The data suggest that organizations specializing in CCIR made a considerably greater effort to make their services visible in their communities.

Table 12

Percentage of Primary, Major, and Minor Organizations Using Specified Methods to Publicize Their Information and Referral Activities[a,b]

Method of Publicizing CCIR Services	Primary (N=15)	Major (N=47)	Minor (N=68)	All Organizations[c] (N=130)
Yellow Pages	93.3%[d]	31.9%	26.5%	36.2%
Newspaper or Magazines	86.7%	63.8%	66.2%	67.7%
Radio Broadcasts	66.7%	55.3%	53.7%	55.8%
Television Broadcasts	46.7%	36.2%	27.9%	33.1%
Posters or Leaflets	100.0%	85.1%	79.4%	83.3%
Listings with Other Organizations	100.0%	91.5%	77.9%	85.4%

[a]Source: 1979 update interviews

[b]These publicity techniques did not necessarily single out CCIR services from general information and referral services.

[c]The total number of organizations varies from table to table due to non-response to certain questions by some organizations.

[d]Percentages do not add up to 100% since organizations frequently used two or more methods to publicize their services.

3. Referral: Matching Parents with Providers

The referral process involves an assessment of parental needs and an attempt to match those needs with available and acceptable choices. The telephone interview gathered information from CCIR organizations concerning what transpired during the actual matchmaking process. From the data obtained, an outline of a typical transaction was developed.

Information Received. In a transaction between the parent and the CCIR organization, the CCIR organization typically asks for the following information:

- the name and address of the consumer;
- the age(s) of the child(ren);
- the hours when care is sought; and
- any special needs the child(ren) has (have).

Similarly, consumers typically request the following information:

- the names and locations of care providers;
- costs, hours care is available, transportation;
- "objective" details of the care provided (e.g., meals, naps,dispensing of discipline, student/staff ratios); and
- qualitative evaluations.

The data indicated that parents are very much concerned with information regarding the quality of care to be received by their child(ren). Respondents generally reported that their clients asked such questions as the following:

- What kinds of children will my child(ren) encounter?
- What kind of environment will my child(ren) be in?
- What kind of person is in charge and how does s/he run the place?
- What kind of experience will this be for my child(ren)?

In addition, consumers frequently asked staff at the CCIR organizations for a qualitative judgement regarding a "good" or the "best" child care provider. About one-fourth of all the organizations surveyed said that a

Table 13

Types of Information Sought by Specified Percentages of Parents[a,b]

	PERCENTAGE OF CCIR ORGANIZATIONS REPORTING TYPES OF INFORMATION SOUGHT BY PARENTS				
PERCENTAGE OF PARENTS	The name of a child care provider with an immediate opening	Detailed information about providers, such as non-smoking environments, or the availability of outdoor recreation	Recommendations about providers the parents are interested in	General guidelines for selecting child care arrangements	Sources of financial assistance for child care
None	1.6%	2.4%	1.6%	2.3%	1.2%
<10%	20.2%	43.7%	32.8%	30.5%	26.6%
10-25%	18.6%	24.6%	24.8%	27.3%	18.8%
26-50%	10.5%	16.7%	18.4%	20.3%	14.8%
51-75%	8.9%	10.3%	15.2%	8.6%	15.6%
>75%	40.3%	2.4%	7.2%	10.9%	22.7%
	100.0%	100.0%	100.0%	100.0%	100.0%

[a]Source: 1979 update interviews.
[b]Based on information obtained from 129 organizations.

majority of their clients asked directly for a recommendation about providers. Also, approximately 20 percent of the agencies said that a majority of parents wanted general guidelines for selecting a suitable child care arrangement **(Table 13)**.

Primary organizations frequently probed for more extensive information than Majors or Minors regarding the parent's and child's needs, special needs of the child, the type of care (center or home) preferred by the parent, and the financial situation of the parent. Similarly, parents dealing with the Primaries reportedly asked for more extensive and detailed information (e.g., the hours of the care, the types of care available, and the specific details of the care their child(ren) would receive).

In terms of the types of care sought, the organizations reported that the parents most frequently wanted a child care arrangement for pre-school children aged 2 - 5 and for infants under age 2. Primaries were most likely to report that the majority of their clients sought care for infants, while Major and Minor organizations reported that most of their clients wanted child care arrangements for their pre-school children.[5]

Table 14

Percentage of Pimary, Major, and Minor Organizations Giving Specified Types of Information to Parents[a]

Type of Information Provided	Primary (N=15)	Major (N=47)	Minor (N=68)	All Organizations (N=130)[b]
The name of a child care provider with an immediate opening	100.0%	76.8%	58.8%	70.0%
Detailed information about providers, such as non-smoking environments, or the availability of outdoor recreation	78.6%	57.5%	50.0%	55.8%
Recommendations about providers the parents are interested in	13.3%	46.8%	37.3%	38.0%
General guidelines for selecting child care arrangements	100.0%	89.4%	76.1%	83.7%
Sources of financial assistance for child care	100.0%	93.6%	82.4%	88.5%

[a]Source: 1979 update interviews

[b]The total number of organizations varies from table to table due to nonresponse to certain questions by some organizations.

Information Provided. The role which the CCIR organization played in the matchmaking process varied considerably. Most organizations indicated that they generally gave consumers the names of two or three day care centers or family day care homes or both. Beyond this, there was a broad variety in the amount of help given to consumers in making a choice. In general, Primary CCIR organizations were more likely to provide parents with the types of information they sought than were organizations with less involvement in CCIR **(Table 14)**. Primaries more often provided detailed information concerning available child care arrangements, sources of financial assistance for child care, and guidelines for selecting a child care provider. Furthermore, considerably fewer Primaries (20 percent) than Majors (54 percent) or Minors (58 percent) reported that they did not know whether spaces were actually available when they made referrals.

4. Follow-up

Relatively few organizations collected the type of information which would allow for an internal assessment of the CCIR function. Only about 30 percent had an "active" follow-up policy and consistently recontacted parents to determine whether they had found care. Another 25 percent had a "passive" follow-up policy, such that they encouraged parents to call back if they had not found care, or if they had a complaint regarding the information they had been given. The remaining 40 percent had no follow-up policy whatsoever **(Table 15)**.

Table 15

Percentage of Primary, Major, and Minor Organizations That Use Selected Methods to Follow Up on Placement of Child in Child Care[a]

Types of Follow Up Methods Used	Primary (N=11)	Major (N=40)	Minor (N=53)	All Organizations[b] (N=104)
Call Each Parent	63.6%	20.0%	28.3%	28.8%
Sample Parents by Phone	9.1%	10.0%	1.9%	1.9%
Mail Out Questionnaires	0.0%	2.5%	0.0%	1.0%
Ask Parents to Call Back	18.2%	35.0%	22.6%	26.9%
Never Follow up	9.1%	42.5%	47.2%	41.4%
TOTAL	100.0%	100.0%	100.0%	100.0%

[a]Source: 1978 in-depth interviews

[b]The total number of organizations varies from table to table due to nonresponse to certain questions by some organizations.

With regard to follow-up, Primary CCIR organizations differed significantly from Majors and Minors. Approximately 65 percent of the Primaries routinely recontacted all parents to determine whether they had obtained care as compared with less than one-third of the Major and Minor organizations. Another nine percent of the Primaries did regular follow-up with a sample of parents to determine if their services were effective and/or what problems parents were experiencing in trying to locate care. In most organizations, however, the available follow-up data were not systematically analyzed. Few organizations were able to use the follow-up information to evaluate organizational effectiveness with respect to the provision of CCIR services.

NOTES TO CHAPTER II

1 For a more detailed description of the methods used in this phase, see O'Hara, J.J. *et al*, "Project Connections: A Study of Child Care Connections Between Parents and Others; Final Report of Phase I." Cambridge: American Institutes for Research, 1979.

2 With 95 percent confidence limits, the ranges of these estimates are 6,391 (plus or minus 1,136) for the total number of organizations; 1,587 (plus or minus 407) for Majors; and 4648 (plus or minus 958) for Minors.

3 To investigate the distribution of CCIR services by income level, the median family income of each sampled catchment was categorized as to whether it fell above or below the average of median family incomes taken over all catchments in the United States. This calculation generated "above-average" income catchments and "below-average" income catchments.

4 The lack of federal funding to support CCIR activities in Primary organizations is due in part to the fact that no federal money is specifically marked for child care information and referral services. State funding for Primaries occurred primarily in California.

5 When asked directly what types of child care were in very short supply in their communities, the most common responses were infant care; family day care homes; care during special hours (for example, evenings and weekends); and subsidized care. Approximately one-fourth of the respondents indicated that in their communities there were certain kinds of child care which had more than enough spaces. The type of care most frequently mentioned in this regard was pre-school care (mentioned by 31.3 percent of those organizations noting a local surplus).

3

Discussion of Phase I Findings

This chapter discusses some of the substantive findings of Phase I of *Project Connections*, examines their possible policy implications, and identifies areas in need of further study.

A. TYPES OF ORGANIZATIONS PROVIDING CCIR

During Phase I, organizations providing CCIR were classified operationally according to their mission or level of effort as *Primaries, Majors,* or *Minors.* While such a categorization was useful for data gathering purposes, a new classification scheme is needed to more appropriately reflect the variety of CCIR organizational activity that was actually discovered. Such a revised classification can then be used to select the most policy relevant types of CCIR for further study.

Organizations providing CCIR services will be reclassified along two dimensions based upon the major function of the organization. This scheme is presented in Table 16. Along the horizontal dimension, organizations are categorized as either providing I&R as their primary service, or providing it as an adjunct to some other service. Along the vertical dimension, organiza-

Table 16

Classification Scheme for Organizations That Engage in CCIR Activities

Primary Service	ORIENTATION	
	Child Care Related	Not Child Care Related
I & R	I. Child Care Resource and Referral	III. General (or multiple) I & R
Other Service	II. Head Start, Child Care Associations, Day Care Centers, 4-C's, Licensing Offices	IV. Welfare Offices, Hospitals, Mental Health Clinics, Libraries, Schools

tions are classified either as specializing in services relating to child care or as having a more general orientation to social services.

The four types of organizations described by this classification scheme all represent existing streams of service delivery for CCIR which are of potential interest to the federal government. However, findings from Phase I suggest that organizations with a general orientation (Types III and IV) are of less immediate relevance for further child care policy study than organizations with a more specialized child care orientation (Types I and II). The basis for this conclusion is discussed below.

- *Non Child-Care Related/Non I&R Agencies(Type IV)* Wherever case work is done, whether in welfare or health settings, CCIR is inextricably a part of the social worker's activities. In the Type IV category, the most frequent providers of CCIR were Welfare Departments. Even though Title XX provides funds for I&R without regard to income, and local Welfare offices use these funds, they did not receive a high volume of calls from the general public.

Most of the organizations in this group were classified as Minors during Phase I. Consequently these Type IV organizations tended to be minimally involved in the provision of CCIR services. Because this type of CCIR will continue wherever case work is found regardless of federal policy, it is not of special policy interest at this time.

- *General Information and Referral Services (Type III)* Although these organizations receive Title XX money and are fairly numerous, Phase I data suggest that they have a low level of involvement in the child care field. In the Phase I sample, only 10 percent of the organizations providing information and referral for child care were of the General I&R type. The majority of these Type III organizations were, during Phase I, categorized as Minors. Analyses of these organizations' functions revealed that they do not usually engage in technical assistance to child care providers or in other activities designed to impact on child care providers or on the child care market. Furthermore, their low volume of child care related calls suggests that they are not reaching very many parents with child care information.
- *Organizations Which Provide CCIR Incidentally to a Child Care Related Service (Type II)* Included in this group are child care licensing units, day care centers, Head Starts, associations of child care centers and/or home providers, and 4-Cs (Child Care Coordinating Council). It is natural for parents to call this type of organization in their search for child care, because they perceive it to have either the service itself or information about it. Head Start and day care centers, for example, receive many more requests for child care from the general public than they themselves can satisfy. In some cases, the agency responds by developing expertise in helping parents find child care outside its own system, or CCIR.

These Type II agencies were, for the most part, classified as Majors during Phase I. To a greater extent than Minors, these organizations were active in the overall child care system in their communities, i.e. in helping

providers with licensing problems, in playing an advocacy role, etc. Because of their high degree of involvement with child care concerns, these Type II organizations warrant further attention.

- *Organizations Specializing in CCIR (Type I)* This set of organizations, which consists of those classified as Primary in the Phase I search process, differs considerably from all others along a variety of dimensions. In effect, their activities are more concentrated than those of other agencies in connecting parents with child care services: they collect and maintain more extensive information about child care options than other organizations, maintain higher levels of quality control regarding the information they do collect, and are more likely than others to do follow-up to determine if parents have been able to find child care. These organizations attract a higher volume of calls than other types, and appear to serve a broader range of socioeconomic and ethnic groups.

  In addition, these organizations offer a greater range of services for parents, providers, and the community-at-large, all of which are designed to improve the overall delivery in the child care system. These functions include: technical assistance to day care centers and family day care homes, including the bringing of unlicensed homes into the licensed stream of delivery; providing community planners with information about local child care supply and demand; counseling parents about what to look for in child care; offering information and referral services for health and social services in general; and providing special supports for specific parents groups such as single parents, parents of handicapped children, etc.

  The Primaries and, to a lesser extent, the child-care focused Major and Minor organizations, appear to be engaging in activities which fill in the gaps caused by the present lack of federal and state administrative supports to the purchase-of-service day care delivery systems. They are generally addressing themselves to the administrative issues of providing parent access; utilization of supply; providing parents with information about their options when supply is not very visible; providing training and technical assistance to providers to improve the quality of the supply; developing new supply when needed; providing planning data on supply/demand; and sometimes engaging in the advocacy efforts aimed at changing policy with regard to licensing or funding.

  Further investigation along the lines discussed below is needed to determine what the most appropriate course of federal action for these Type I organizations — and for CCIR organizations in general — should be.

B. AREAS IN NEED OF FURTHER RESEARCH

1. Consumer Utilization of CCIR

Phase I produced some suggestive data about the conditions under which parents use formal CCIR. The data indicate that the Primaries are

attracting their highest volume of calls from urban working class families who are just above the poverty level. The earnings of many of these families are low, and it is probable that without the job of the second parent they would be in the lowest economic group, and served by the Welfare service system. The evidence suggests that the Primaries may be responding to the needs of the families left out of present day care public policy — people who are often ineligible for subsidy but who have great difficulty in finding child care within their means.

Although Phase I collected data from CCIR organizations regarding the ethnicity and socioeconomic status of their consumers, there is no systematic or objective information available that distinguishes the population of "consumers" from "non-consumers" of CCIR. For the population at large in any given community, it is unclear where or how CCIR fits, along with other formal or informal networks, in the search for child care. It may be, for example, that non-users of CCIR have adequate resources for finding child care. On the other hand, they may have few resources but may not know about the availability of a CCIR organization. Or it may be that when child care is in short supply, many parents find it on their own and fill up the scarce "slots," so that other parents then need extra help in a frustrating, and not always successful, search.

Although further research is necessary, about the characteristics of consumers and nonconsumers of CCIR and about the determinants of utilization and non-utilization, the data suggest that when parents seeking child care know of CCIR services, they use them. The Primaries, which make the greatest effort to reach the community receive an average of over 100 calls a week — a significantly greater number than the Majors and Minors, which are not as visible.

2. Use of CCIR to Improve Child Care Service

In addition to increasing parental access to child care information, the data suggest that an expansion of CCIR services could actually improve the quality and availability of child care resources and increase parental access to other child and family related services. Again, further research is necessary, but a comparison of the Primary, Major, and Minor CCIR organizations suggests the following potential benefits of CCIR:

- *Balancing Supply and Demand.* Experts agree that there are seasonal and local imbalances in child care supply and demand. Phase I data suggest that Primaries keep records of available spaces and overcrowdings at various child care facilities to a greater degree than Majors and Minors. Furthermore, Primaries were most active in bringing unlicensed providers into the "referrable" supply. By making a major effort to connect supply with demand and to stimulate new supply of family day care, CCIR contributes to the smoothing of peak demand periods. Further, some CCIR compile records documenting

types of service in short- or over-supply, a type of data needed for incremental and decremental planning.

- *Decategorizing Service.* In some localities, child care often segregates children by social class and therefore ethnic groups. Again, the Primaries (with the greatest resources and highest level of effort) were more likely than Majors and Minors to report serving a truly mixed clientele. The Primaries tend to help low-income parents find funds for child care and refer them to programs used by middle-income parents, practices which can also lessen social class and income segregation. The current tendency for child care to fall into two distinct groups (subsidized care for low income families, private care for the middle class) might decrease through the wider use of CCIR services.
- *Making Services More Accessible.* CCIR may help to connect families with other needed health and social services for which they are eligible. A major concern of government is the under-utilization of health and social programs. CCIRs typically provide information to parents about other services available in the community and, in some instances, actually provide those services.
- *Improving Quality.* CCIRs generally provide parents with information about how to select child care. By consumer education, they encourage more informed choice, increase provider accountability, and therefore encourage higher quality child care. CCIRs also provide training for caregivers and work with unlicensed facilities to make changes needed to obtain licensing.

3. Effects and Effectiveness

As a policy study, *Project Connections* needs to gather information regarding how effective different types of CCIR services are and how effective they are for different populations. The Phase I results suggest that organizations providing CCIR, with the exception of Primaries, rarely collect data concerning the effects of their service on their parent-consumers. Not many organizations have the time or staff to do any regular follow-up to determine if consumers have located child care, and even fewer do any sort of evaluation to determine if consumers find certain aspects of their service more helpful than others. Even those who do perform follow-up activities seldom tabulate the results. Further study of the effects of CCIR services will require the implementation of follow-up procedures at selected CCIR organizations.

4. Costs

Although the telephone survey yielded some information concerning the finances of CCIR organizations, very few of the respondents could pro-

vide accurate figures for the cost of CCIR services. Nor could respondents estimate the costs of the various functions involved in providing CCIR and other related services. There will be no means of comparing the efficiency of different I&R organizations until a methodology is devised for collecting and analyzing comparable cost data from different types of CCIRs. Thus, the next phase of the study will have to develop functional cost accounting procedures in order to study and compare the costs associated with particular functions and/or effects in different CCIR organizations. Any policy recommendations will need to consider the costs, as well as the effects, of different ways of delivering information to parents regarding child care. It will also be of interest to determine whether the additional functions performed by some CCIR organizations add substantially to the costs of their operations, or whether they are low-cost benefits which should be included in all CCIR operations.

C. CONCLUSION

Phase I of *Project Connections* has identified the extent and major characteristics of organizations currently providing information and referral for child care in the United States. The baseline data suggested that a rather large number of organizations — about 6,400 — is currently providing CCIR services to parents. However, the bulk of the CCIR requests is handled by a relatively small percentage of organizations — i.e., those which were classified as Primaries or Majors.

The extent to which available CCIR services are adequate has yet to be determined. Nor is it clear that volume of calls is related to overall effectiveness. Future phases of the study will explore the impact that CCIR services, and different models of service delivery, have upon parents, child care providers, and communities as a whole and will analyze this impact in terms of its future national policy relevance.

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